

AMENDMENT TO THE DRAWINGS

Figs. 2 and 3 have been amended. The attached sheets of formal drawings replace the original sheets including Figs. 2 and 3.

REMARKS/ARGUMENTS

Applicant responds herein to the Office Action dated March 1, 2007.

Applicants appreciate the Examiner's thorough search and examination of the present patent application.

Claims 1, 3, 5, 9, 11, and 13-21 have been amended, claims 2, 4, 6, 7, 8, 10 and 12 have been canceled, and claims 22-28 have been added to define applicants' invention.

It is noted that the drawings are objected to for failing to comply with 37 C.F.R. §§1.84(p)(4) and (5). In connection with the Examiner's objections to the drawings, applicants have amended the specification and the drawings, and enclose herewith replacement sheets of drawings. Applicants respectfully submit that the changes to the drawings and the specification effectively overcome the Examiner's objections.

Applicants respectfully disagree with the Examiner's characterization that reference characters 712 and 902 are both used to designate receiving notification of a credit memo status. Reference character 712 relates to receiving notification of a credit memo status, which relates to the disposition of a request for a credit memo (see applicants' written description, paragraph [0023]). Reference character 902, instead, relates to a notification that a request for a credit memo has been sent by a health care organization (see applicants' written description, paragraph [0025]). While both 712 and 902 relate to notifications, the notifications are distinct, and reconsideration is requested.

Applicants further respectfully disagree with the Examiner's characterization that reference characters 404 and 1412 are both used to designate organizing data. While both 404 and 1412 relate to organizing data, the kinds of data that are being organized are distinct and different. Reference numeral 404 relates to organizing census, transaction, pricing, and contract data (see applicants' written description, paragraph [0016]), and 1412 relates to organizing survey data (see applicants' written description, paragraph [0026]). Therefore, applicants submit that reference characters 404 and 1412 relate to different elements, and, accordingly, reconsideration is requested.

Claims 1-6, 12, 15 and 18 have been rejected under 35 U.S.C. §102(b) as being anticipated by Barber et al. ("Barber," U.S. Patent No. 4,858,121). Applicants respectfully traverse this rejection.

Applicants submit that elements defined in independent claim 1, as amended, are not taught, suggested or disclosed by Barber. Since elements of applicants' claim 1 are missing from Barber, Barber cannot render the claims anticipated under 35 U.S.C. §102(b).

Claim 1 is directed to a method for "improving the accuracy of monetary charges to payors in a transaction." The combined missing elements in applicants' claim 1 include "receiving by a processing center" 400 "electronic patient census data from a health care organization" 100 wherein the "census data" includes "at least one of a health care facility identification, a health care facility unit identification, a health care facility room number, a health care facility bed number, a patient admission date, a patient discharge date, a patient payment plan, and physician information." Further, the missing elements in applicants' claim 1 include "transaction data" that is received "by the processing center" from a "pharmacy" 204, wherein the transaction data includes "at least one of a description of an item sold, a quantity of an item sold, an item price and a transaction date." Moreover, the missing elements include "correlating the census data and the transaction data with existing payor contract data to form a related dataset" and "examining by the pharmacy" "the related dataset" to determine whether a "proper prescription is charged, a proper price is charged, a contractual term is met, [and/or] whether respective charges are to be allocated to a plurality of payors." The missing elements further include "validating by the pharmacy the related dataset" that includes "correcting the electronic transaction data" in case the pharmacy identifies "a discrepancy." Moreover, the missing elements include allocating a "monetary charge" to a payor or "allocating respective monetary charges" to a "plurality of payors." Further, an "invoice" is generated "as a function of the validated related dataset" and the invoice is transmitted "to the health care organization."

Barber does not teach, disclose or suggest the missing elements of applicants' amended claim 1. Barber, instead, is directed to providing insurance claims and expediting medical claims and bill processing. Barber teaches a medical payment system in which physician, patient, medical service, insurance, and other medically related data are entered in terminals A and received by a central processing system B (e.g., see Barber, Fig. 1, column 3, line 26 - column 4, line 10). A physician file is referenced to correlate participating physicians with received physician information data, a patient memory stores patient data and referenced to verify received patient data, and an insurance company file stores appropriate formats for medical claims for

each of a plurality of participating insurance companies. In addition to recording credit card payments, Barber's system receives claims information, sorts the claims by insurance company and reformats the claims into an appropriate respective format (see Barber, column 7, line 41 - column 8, line 11). However, Barber does not teach, disclose or suggest electronic patient census data received from a health care organization 100. Further, Barber does not teach or suggest "transaction data" received from a "pharmacy," nor "correlating the census data and the transaction data with existing payor contract data to form a related dataset." Further, Barber does not teach or suggest "validating" by a "pharmacy" a dataset of "correlated census data" and "transaction data" with "payor contract data" that includes "correcting" data by the "pharmacy" in case a "discrepancy" is identified. Nor does Barber teach generating an invoice as a function of the "validated" dataset. For at least the above-stated reasons, Barber does not anticipate the claims. Reconsideration is requested.

Claims 3, 5, 12, 15 and 18 depend directly or indirectly from claim 1 and are, therefore, patentable for the same reasons as well as because of the combination of features in those claims with the features set forth in claim 1.

Claims 7-10, 13-14, 16 and 19-20 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Barber in view of Lilly et al. ("Lilly," U.S. Patent Application Publication No. 2003/0093295).

Applicants respectfully submit that Lilly does not teach or suggest the missing elements that are missing from the teachings of Barber. Lilly is directed to a controlled substance tracking system and method. In particular, a complete prescriptive medication history, including active and inactive prescriptive medications is stored for a plurality of patients (e.g., see Lilly, Abstract, paragraph [0051]). Various entities, including hospitals, doctors, pharmacies, insurance companies, government agencies and the like have secured access to a patient's medication information, thereby ensuring that prescription drugs are less likely to be abused or improperly prescribed (see paragraph [0058]). Thus, Lilly is directed with patient safety and healthcare provider liability by securely providing patient prescription drug history.

Applicants submit that Lilly does not teach, disclose or submit applicants' claim 1 "electronic patient census data" received from a health care organization 100, "transaction data" received from a "pharmacy," nor "correlating the census data and the transaction data with

existing payor contract data to form a related dataset.” Further, Lilly does not teach or suggest “validating” by a “pharmacy” a dataset of “correlated census data” and “transaction data” with “payor contract data” that includes “correcting” data by the “pharmacy” in case a “discrepancy” is identified. Moreover, Lilly does not teach generating an invoice as a function of the “validated” dataset. For at least the above-stated reasons, Lilly does not provide the missing elements and, therefore, claims 9, 13-14, 16 and 19-20, which depend directly or indirectly from claim 1 and define features in combination with the features set forth in claim 1, are not rendered obvious under 35 U.S.C. §103(a) by the combination of Barber and Lilly. Reconsideration is requested.

Further, Claims 11, 17 and 21 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Barber in view of Oscar et al. (“Oscar,” U.S. Patent Application Publication No. 2001/0037216) and further in view of Lilly.

Applicants respectfully submit that Oscar does not teach or suggest the missing elements that are missing from the combined teachings of Barber and Lilly. Oscar is directed to a pharmacy benefits management system and method (e.g., see Oscar, Abstract). In particular, Oscar provides pharmacy cost and clinical information to physicians and patients “to permit patients and physicians to become active participants in drug therapy decisions with cost factors being considered” (e.g., see Oscar, paragraph [0015])). Pharmacy benefits plan information and price information relating to “drugs in various classes” are correlated, and alternative drugs and expenses associated with alternative drugs are provided (see paragraph [0016]). Thus, Oscar is concerned with suggesting alternative medications to enable patients to confer with their physicians to determine whether a particular alternative drug is appropriate, primarily for cost savings purposes.

Applicants submit that Oscar does not provide the missing elements from applicants’ amended claim 1. In particular, Oscar does not teach, disclose or submit applicants’ claim 1 “electronic patient census data” received from a health care organization 100, “transaction data” received from a “pharmacy,” nor “correlating the census data and the transaction data with existing payor contract data to form a related dataset.” Further, Oscar does not teach or suggest “validating” by a “pharmacy” a dataset of “correlated census data” and “transaction data” with “payor contract data” that includes “correcting” data by the “pharmacy” in case a “discrepancy”

is identified. Moreover, Oscar does not teach generating an invoice as a function of the "validated" dataset. For at least the above-stated reasons, Oscar does not provide the missing elements and, therefore, claims 11, 17 and 21, which depend directly or indirectly from claim 1 and define features in combination with the features set forth in claim 1, are not rendered obvious under 35 U.S.C. §103(a) by the combination of Barber, Lilly and Oscar.

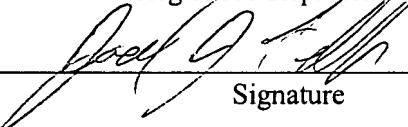
For the foregoing reasons, applicants further submit that new claims 22-28 are patentable, as well.

Accordingly, in view of the amendments to the drawings, specification and claims, the Examiner is respectfully requested to reconsider the application, allow the claims as amended and pass this case to issue.

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on July 2, 2007:

Joel J. Felber

Name of applicant, assignee or
Registered Representative


Signature

July 2, 2007

Date of Signature

LCD:JJF:ck

Respectfully submitted,



Joel J. Felber
Registration No.: 59,642
OSTROLENK, FABER, GERB & SOFFEN, LLP
1180 Avenue of the Americas
New York, New York 10036-8403
Telephone: (212) 382-0700